BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS

2535 Capitol Oaks Drive, Suite 300, Sacramento, California, 95833-2944

Telephone: (916) 263-2222 – Toll Free: 1-866-780-5370

Facsimile: (916) 263-2246



Name Change Affidavit

www.bpelsg.ca.gov

To: Board for Professional Engineers and Land Surveyors, State of California

l,	(Name)	, declare under	
penalty of perjury that the follow	. ,	and correct:	
I have changed my name for al	l intents and purposes f	rom:	
(Last)	(First)	(Middle)	
	to		
(Last)	(First)	(Middle)	
Examinee ID. Number/Branch:			
License/Registration Number(s (List all branches in which you): u are licensed. Your name w	ill be changed on the records for those yo	ou list.)
Effective date of change:			
Daytime Phone Number: ()		
Signature (Rev. 1/11)		Social Security Number	